PTO/SB/06 (08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number		
CLAIMS AS FILED - PART I (Column 1) (Column 2)					Column 2)	SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY	
<u> </u>	FOR ASIC FEE	NUN	BER FILE	NUM.	BER EXTRA	RATE	FEE]	RATE	
(37 CFR 1.16(a))							s	1	KATE	FEE
	TAL CLAIMS 7 CFR 1.16(c))		minus 2	20 = 1				OR	<u> </u>	\$
IN	DEPENDENT CLA 7 CFR 1.16(b))	IMS				× \$=	ļ	OR	X \$=	
	1		minus	3 =		_X \$=		OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ \$=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II										
<u> </u>	(Column 1)			(Column 2)	(Column 3)	SMALLE	NTITY	OR	OTHER SMALL	
AMENDMENT A	1 11/23 - 1	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total (37 CFR 1.16(c))	22	Minus	PAID FOR	= 0		FEE			FEE
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	(37 CFR 1.16(b))	1 //	<u> </u>	12	\perp \cup	x \$=		OR	x \$=	
/	FIRST PRESEN	TATION OF MULTIP	LE DEPEND	ENT CLAIM (37 C	FR 1.16(d))	+\$ =	/~	OR	+\$ =	
						TOTAL <		OR	TOTAL	
		(Column 1)		(Column 2)	(Column 2)			ΟI .	ADD'L FEE	
AMENDMENT B		CLAIMS		HIGHEST	(Column 3)			r	·	
	Total	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
	(37 CFR 1.16(c))		Minus	••	=	X \$ =				FEE
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					X \$=		OR	X \$=	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						+ \$ = TOTAL		OR	+ \$=	
						ADD'L FEE		OR	ADD'L FEE	
		(Column 1) .		(Column 2)	(Column 3)					
AMENDMENT C	-	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	' ADDI- TIONAL
	Total (37 CFR 1.16(c))	•	Minus	**	=			 		FEE
	Independent (37 CFR 1.16(b))	•	Minus	***	=	X \$ = X \$ =			X \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ \$ =			X \$=	
* If the entry in column 1 is less than the color is column 2 and the column 1 is less than the color is column 2 and the color is column 2.									+ \$= TOTAL ADD'L FEE	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 21, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For" (Total or Independent) is the highest Number Previously Paid For (Total or Independent) is the highest Number Previously Paid For (Total or Independent) is the Number Previously Paid For (Total or Independent) is the Number Previously Paid For (Total or Independent) is the Number Previously Paid For (Total or Independent) is the Number Previously Paid For (Total or Independent) is the Number Previously Paid For (Total or Independent) is the Number Previously Paid For (Total or Independent) is the Number Previously Paid For (Total or Independent) is the Number Previously Paid For (Total or Independent) is the Number Previously Paid For (Total or Independent Previously Paid For (Total or Indepe										

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Palent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.